



Testimony of Giovanna Pisani, MSW Director of Mid-Fairfield Substance Abuse Coaliton, a program of Human Services Council

*H.B. No. 7027 AN ACT CONCERNING THE STATE BUDGET FOR THE BIENNIUM ENDING JUNE THIRTIETH 2019, AND MAKING APPROPRIATIONS THEREFOR.

February 23 2017 Appropriations Subcommittee on Health Public Hearing Department of Mental Health & Addiction Services, Regional Action Council Funding

Dear: Senator Osten, Senator Formica, Representative Walker, Senator Gerratana, Senator Markley, Representative Dillon and members of the Appropriations Subcommittee:

My name is Giovanna Pisani and I am the Regional Action Council Director for Mid-Fairfield Substance Abuse Coaliton, a program of Human Services Council. We serve the towns of Norwalk, Westport, Weston, and Wilton. On behalf of the Connecticut Prevention Network (CPN), I am writing to strongly oppose the grave cuts to regional action councils because if funding cuts are implemented as proposed, that will be the end of CPN.

The **Connecticut Prevention Network (CPN)** is an association of the state's 13 community partnership **Regional Action Councils (RACs)** connected to all 169 Connecticut Communities. We mobilize communities and provide education, training and advocacy to reduce substance abuse and promote mental health awareness.

The need for prevention continues to grow, especially with the opioid crisis affecting communities across Connecticut. Some of Connecticut Prevention Network's opioid abuse prevention and harm reduction initiatives include:

- Continuing to support the medication drop box program where unwanted medications are safely disposed of and not accessible for potential abuse. In 2010, CPN in partnership with the Connecticut Department of Consumer Protection, developed and implemented the medication drop box pilot in 4 communities. Today, over 70 communities have a medication drop box and the number is growing. In 2015, 23,541 pounds of unwanted medications were collected. In 2016, 33,803 pounds were collected.
- Educated over 10,000 community members through forums. These forums have been catalysts for communities to take action at the local level and have informed state level initiatives.
- Facilitated Narcan Trainings for more than 1,400 people.
- Active partner on many collaboratives that address the opioid crisis across the continuum of prevention, intervention, treatment and recovery

Connecticut Prevention Network also focuses on suicide prevention and mental health promotion. To date CPN members have trained close to 12,000 community members in QPR (Question, Persuade,Refer), an evidence-based gatekeeper suicide prevention training.

These initiatives are a very small depiction of what we do. How we do our work includes:

- Building relationships with key community leaders to affect change
- Providing capacity building support to local prevention councils in over 150 towns.
- Effectively, mobilizing at the local and regional level. Because of our many relationships, we are able to quickly bring together people around an issue. An example would be forums addressing opioid abuse, and the Quilting project.
- Using the DMHAS; Strategic Prevention Framework that addresses local conditions and aligns with federal indicators to measure progress.
 - This has resulted in: Producing needs assessment used to inform state application for federal funds and to identify and address priority areas at the regional and local levels.

CPN Procured over \$11 million in federal, private and local funding and more than \$850,000 in in-kind donations per year.

• CPN produced regional assessments of mental health and addiction services used in the state application for federal funding of \$23 million.

CPN's work is a revenue saver- multiple studies indicate that every \$1 spent on prevention results in an average of \$10 in long term savings including healthcare costs.

I urge you to reject the severe budget cuts to regional action councils and keep in place the current CT Prevention Network structure. If this budget becomes existent my program will not be able to survive without DMHAS' funding.

Sincerely,

Giovanna Pisani, MSW

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